

PTO/SB/17 (01-06) Approved for use through 7/31/2006. OMB 0651-0032

TRADEMARK	DOE no nomen are required to	U.S. Pater	nt and Tradema	rk Office; U.S. DEI	PARTMENT OF	F COMMERCI	
	respond to a collection of information unless it displays a valid OMB control number  Complete if Known						
Fees pursuant to the Consolidated Appropri	Application Nu	_	697,001-Conf. #8244				
FEE TRANSI	Filing Date		October 31, 2003				
For FY 20		First Named Inventor Kyoko MATSUDA					
	Examiner Name T. T. Van Ro		. T. Van Roy				
Applicant claims small entity statu	Art Unit	828					
TOTAL AMOUNT OF PAYMENT	Attorney Docke	et No. 0033-0907P					
METHOD OF PAYMENT (check a	all that apply)					<del>-</del> -	
X Check Credit Card	Money Order No	ne Other	(please identi	fy):			
Deposit Account Deposit Account N			_	wart, Kolasch	& Birch, Ll	LP	
For the above-identified depo							
Charge fee(s) indicated			•	cated below, ex	cept for th	e filina fee	
		<b>片</b> `	• • •				
fee(s) under 37 CFR 1.	ee(s) or underpayment of 16 and 1.17	x Credi	t any overpa	yments			
FEE CALCULATION (All the fee	es below are due upo	n filing or may	be subject	t to a surcha	arge.)		
1. BASIC FILING, SEARCH, AND EX	AMINATION FEES						
FIL		ARCH FEES		ATION FEES			
Application Type Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility 300	150 500	250	200	100			
Design 200	100 100	50	130	65			
Plant 200	100 300	150	160	80			
Reissue 300	150 500	250	600	300			
Provisional 200	100 0	0	0	0			
2. EXCESS CLAIM FEES						Small Entity	
Fee Description					Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissu	ies)				50	25	
Each independent claim over 3 (inclu	ding Reissues)				200	100	
Multiple dependent claims					360	180	
Total Claims Extra Claims	Paid (\$)	<u>Mu</u>	Itiple Depende				
21 21 - = x			Fee	<u>: (\$)</u> <u>F</u>	Fee Paid (\$)	1	
HP = highest number of total claims paid for,		D-14 (A)		<del></del>		_	
Indep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)					
5 = x  HP = highest number of independent claims	paid for, if greater than 3.	<del></del>					
			-			_	
3. APPLICATION SIZE FEE  If the specification and drawings ex-	ceed 100 sheets of paper	(excluding elect	ronically file	ed sequence or	computer		
listings under 37 CFR 1.52(e)), t							
sheets or fraction thereof. See 35	5 U.S.C. 41(a)(1)(G) and	37 CFR 1.16(s).	•				
<u>Total Sheets</u> <u>Extra Sheets</u>	Number of each	additional 50 or fra	ction thereof	<u>Fee (\$)</u>	Fee P	<u>aid (\$)</u>	
- 100 =		(round up to a wh	iole number) x		·		
4. OTHER FEE(S)					<u>Fees F</u>	Paid_(\$)	
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge). 1801 Request for continued examination (RCE) (see 37						790.00	
Other (e.g., late filing surcharge):	1251 Extension for re			,000 07		0.00	
SUBMITTED BY	7)						
Signature /////////	Sount	Registration No.	29,271	Telephone	(703) 205	-8000	
Name (Print/Type) Charles Gorenstei	/	(Attorney/Agent)		Date	August 28, 2006		